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FORM D

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
FORM LIMITED OFFERING EXEMPTIO

OMB APPROVAL							
OMB Number:	3235-0076						
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UNIFORM LIMITED OFFERING EXEM									
Name of Offering (Prick if this is an amendment and name has changed, and indicate change.) Special Opportunities Fund IV, L.P. — Offering of Partnership Interests									
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506									
Type of Filing: ☑ New Filing ☐ Amendment	DDO:								
A. BASIC IDENTIFICATION DA	TA PROUESSED								
Enter the information requested about the issuer	S May a a								
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Special Opportunities Fund IV, L.P.									
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including A ea Val)								
1325 Avenue of the Americas, Suite 2800, New York, NY 10019	(212) 736-8380 FINANCIAL								
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)								
Brief Description of Business									
Investment Fund									
Type of Business Organization ☐ corporation ☐ business trust ☐ limited partnership, already formed ☐ other (plushing)	ease specify): 07083928								
Actual or Estimated Date of Incorporation or Organization: Month Year									

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Avenue, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☑ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director □ General and/or Managing Partner Full Name (Last name first, if individual) Precision Capital IV, L.P. **Business or Residence Address** (Number and Street, City, State, Zip Code) 1325 Avenue of the Americas, Suite 2800, New York, NY 10019 Check Box(es) that Apply: □ Promoter ■ Beneficial Owner □ Director ☐ Executive Officer ⊠ General and/or Managing Partner Full Name (Last name first, if individual) Precision Capital IV, LLC **Business or Residence Address** (Number and Street, City, State, Zip Code) 1325 Avenue of the Americas, Suite 2800, New York, NY 10019 Check Box(es) that Apply: ☐ Promoter ☐ General and/or ☐ Beneficial Owner □ Director Managing Partner Full Name (Last name first, if individual) Todd Kesselman **Business or Residence Address** (Number and Street, City, State, Zip Code) Precision Capital IV, L.P. 1325 Avenue of the Americas, Suite 2800, New York, NY, 10019 Check Box(es) that Apply: ☐ General and/or ☐ Promoter ☐ Beneficial Owner □ Director Managing Partner Full Name (Last name first, if individual) Gina LaVersa **Business or Residence Address** (Number and Street, City, State, Zip Code) Precision Capital IV, L.P. 1325 Avenue of the Americas, Suite 2800, New York, NY, 10019 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) **Business or Residence Address** (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter ■ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) **Business or Residence Address** (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner □ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) **Business or Residence Address** (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

B. INFORMATION ABOUT OFFERING															
1.	Has the	iceuar en	ld or does	the issue	r intend to	sell to no	n-accredite	ad investor	re in this of	fforing?	·		Ye [No ⊠
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.															
2.	What is	the minim	num invest		٠.	,		•					\$1	,000,0	00
	2. What is the minimum investment that will be accepted from any individual? \$1,000,000 (which the General Partner may waive in its sole discretion)														
3.	Does th	e offerina	nermit ioir	ot ownersh	nin of a sin	ale unit?						•	Ye	_	No
3. 4.	5, , , , , , , , , , , , , , , , , , ,														
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.															
Full Name (Last name first, if individual)															
Business or Residence Address (Number and Street, City, State, Zip Code)															
Nan	ne of Ass	ociated B	roker or D	ealer							 				
Stat					d or Intend								🔲 All S	Statoo	
														olales	
	AL	[AK]	[AZ]	AR	CA)	[CO]	CT CT	DE	DC	FL	GA	HI			
	[L]	IN I	IA.	KS	KY]		ME]	MD	MA	[MI]	MN	MS	MO		
	MT RI	SC	[NV]	NH]	NJ]	[NM]	NY	NC	ND	OH)	OK]	OR US	PA DD		
Full			SD first, if ind		[TX]	[UT]	VT	VA	WA	[WV]	WI	WY	PR		
Bus	iness or	Residence	e Address	(Number a	and Street,	City, State	e. Zip Cod	e)						.	_
						,,	, _ p	-,							
мап	ne of Ass	ociated B	roker or D	ealer											
Stat	tes in Wh	ich Perso	n Listed H	as Solicite	d or Intend	ls to Solici	l Purchase	ers							
	(Check		s" or check	k individua									🔲 All S	States	
	AL	AK	AZ	AR	CA	[CO]	CT	DE	DC	FL	GA	HI	ID]		
		IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO		
	MT	NE	[NV]	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA		
	RI	SC	SD	TN	TX	UT	∇T .	VA	WA	WV	WI	WY	[PR]		
Full	Name (L	ast name	first, if ind	ividual)											
Bus	iness or	Residence	Address	(Number a	and Street,	City, State	e, Zip Cod	e)							
Name of Associated Broker or Dealer															
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers															
(Check "All States" or check individual States)															
	AL	AK	ΑŽ	AR	CA	CO	CT	DE	DC	FL	GA	H			
		IN	IA	KS	ΚΥ	ĹΑ	ME	MD	MA	MI	MN	MS	MO		
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA		
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	Wi	WY	PR		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. **Amount Already** Aggregate Type of Security Offering Price Sold Debt..... N/A N/A Equity N/A N/A ☐ Common ☐ Preferred Convertible Securities (including warrants) N/A N/A Partnership Interests.... \$ 101,180,000 \$ 250,000,000 Other (Specify:) N/A N/A Total \$ 250,000,000 \$ <u>101,180,000</u> Answer also in Appendix, Column 3, if filing under ULOE, Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number of Purchases Investors Accredited Investors \$ 101,180,000 Non-accredited Investors ______ N/A N/A Total (for filings under Rule 504 only)..... N/A N/A Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C —Question 1. Type of **Dollar Amount** Type of Offering Security Sold Rule 505 N/A N/A Regulation A N/A N/A. N/A N/A N/A N/A Total

Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees..... Printing and Engraving Costs..... \$ 74,865 Legal Fees..... \boxtimes Accounting Fees Engineering Fees.... Sales Commissions (specify finders' fees separately)..... \Box Other Expenses (identify) Total \boxtimes \$ 74,865

5.	and total expenses furnished in response to P proceeds to the issuer."	e offering price given in response to Part C — Questiant C - Question 4.a. This difference is the "adjusted good series of the issuer used or proposed to be user any purpose is not known, furnish an estimate and class of the payments listed must equal the adjusted good Part C — Question 4.b above.	gross ed for check	-	ments to	\$ _249,	925,135
			Dir	Officers, ectors, & Affiliates	Payments to Others		
	Salaries and fees		******	□\$_	N/A	_ 🗆 \$_	N/A
	Purchase of real estate			□\$	N/A	_ 🗆 \$_	N/A
	Purchase, rental or leasing and installati and equipment	on of machinery		□ \$	N/A	_ 🗆 \$_	N/A
	Construction or leasing of plant buildings	and facilities		□\$	N/A	_ 🗆 \$_	N/A
	Acquisition of other businesses (includin offering that may be used in exchange for issuer pursuant to a merger)			□ \$	N/A	_ 🗆 \$_	N/A
	Repayment of indebtedness			□ \$_	N/A	□ \$_	N/A
	Working capital		□ \$	N/A	□\$	N/A	
	Other (specify): Investment Purposes		□ \$	N/A	_ 🛛 \$ _	249,925.135	
	Column Totals Total Payments Listed (column totals ad		□\$		_ ⊠\$ _	<u>249,925,135</u> 135	
		D. FEDERAL SIGNATURE					
sign	ature constitutes an undertaking by the issu	ned by the undersigned duly authorized person. If her to furnish to the U.S. Securities and Exchange accredited investor pursuant to paragraph (b)(2) of R	e Comm	nission.	filed under f upon writte	Rule 505, in reques	the following st of its staff,
Issu	er (Print or Type)	Signature	Date				
Sp	ecial Opportunities Fund IV, L.P.	Nove	mber	17, 2007			
Nan	ne of Signer (Print or Type)	Title of Signer (Print or Type)					
Gir	na LaVersa	Member of Precision Capital IV, LLC, t Capital IV, L.P., the General Partner	the Ge	neral	Partner o	f Preci	ision

END

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)